



ELIGIBILITY

All registered, degree seeking **School of Medicine students** taking credits are required to have health insurance coverage, either through this Student Health Insurance Plan or through another individual or family plan. Students are automatically enrolled in the Student Health Insurance Plan unless proof of comparable coverage is provided by completing the waiver.

The online waiver and proof of comparable coverage must be submitted before the deadline date and approved. Premiums are collected by the Cashier's office with tuition during registration.

All registered, degree seeking **School of Dental Medicine DMD, DDS, Orthodontic (Resident and Fellowship), and Pediatric students** taking credits are required to have health insurance coverage, either through this Student Health Insurance Plan or through another individual or family plan. Students are automatically enrolled in the Student Health Insurance Plan unless proof of comparable coverage is provided by completing the waiver.

The online waiver and proof of comparable coverage must be submitted before the deadline date and approved. Premiums are collected by the Cashier's office with tuition during registration.

Insured students who are enrolled in the Student Health Insurance Plan may also enroll their eligible dependents. **All International Students are required to have a F-1 Visa, and dependents have a F-2 Visa to be eligible for this insurance plan.**

Please view the complete brochure on-line at unlv.myahpcare.com for full details of participation in the plan.

ADDITIONAL BENEFITS

- Access to Telehealth
- Coverage when traveling
- Academic Emergency Services*

*Academic Emergency Services and AD&D coverage are underwritten by 4 Ever Life International Limited and administered by Worldwide Insurance Services, LLC, separate and independent companies from Academic HealthPlans.



University of Nevada, Las Vegas 2021-2022

This is for informational purposes only and is neither an offer of coverage nor medical advice. It contains only a partial, general description of plan benefits and programs and does not constitute a contract. Covered Medical Expenses are subject to plan maximums, limitations, and exclusions as described in the Policy. The PPO network is **Aetna PPO**.

Student Health Center: The **Deductible is waived if Covered Medical Expenses are incurred at the Student Health Center. The Student Health Center Pharmacy has a \$20 Copay per prescription. A SHC referral is not required, and it does not guarantee services received will be considered eligible expenses under the plan, nor is it a guarantee of payment. Insured dependents are not eligible to use the UNLV SHC. The benefits listed in the Schedule of Benefits are available to the insured dependents.

MAXIMUMS & DEDUCTIBLES

	IN-NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER
Benefit Maximum per Insured Person, per Policy Year	Unlimited	
**Deductible per Insured Person, per Policy Year	\$ 250	\$ 500
Individual Out-of-Pocket Maximum per Insured Person, per Policy Year	\$ 3,750	\$ 7,500
Family Out-of-Pocket Maximum for all Insureds in a Family, per Policy Year	\$ 7,500	\$ 15,000

COVERAGE & COST

School of Medicine & School of Dental Medicine - Orthodontics & Pediatrics

Annual	07/01/21 - 06/30/22
Waiver Deadline	05/21/21 - 07/15/21
Student	\$ 2,718.70
Spouse	\$ 2,718.70
Each Child ¹	\$ 2,718.70

School of Dental Medicine (DDS & DMD)

Annual	08/25/21 - 08/24/22
Waiver Deadline	06/15/21 - 09/05/2021
Student	\$ 2,718.70
Spouse	\$ 2,718.70
Each Child ¹	\$ 2,718.70

¹Coverage for two (2) or more children is calculated at the child rate times two (2).

To view enrollment and coverage periods available, please visit unlv.myahpcare.com.

BENEFITS *(Deductible applies unless otherwise stated below)*

IN-NETWORK PROVIDER <i>Payments are based on the Negotiated Charge</i>	OUT-OF-NETWORK PROVIDER <i>Payments are based on the Recognized Charge</i>
Hospital Room and Board Expenses	
80%	50%
Inpatient/Outpatient Surgery	
80%	50%
Physician and specialist , including Consultants Office Visits	
80% after a \$25 Copayment	50% after a \$25 Copayment
Diagnostic Testing	
80%	50%
Outpatient Physical, Occupational, Speech, and Cognitive Therapies , including Cardiac and Pulmonary Therapy	
80%	50%
Hospital Emergency Room , Copay waived if admitted	
80% after a \$100 Copayment	80% after a \$100 Copayment
Preventive Care Services For more information, please visit healthcare.gov/preventive-care-benefits	
100% (deductible waived)	50%
Prescription Drugs , Deductible waived	
At pharmacies contracting with Aetna	50%
70%	

This document contains a summary of your school's student health insurance policy benefits and restrictions as of the date of its publication; the summary document may differ from the benefits in the approved policy of insurance. The final policy may be pending approval by applicable federal and state regulatory authorities. The final approved policy of insurance is accessible upon approval at unlv.myahpcare.com.